

Incident Report

Print Date/Time: 02/08/2016 12:42

Login ID: ss0139 Lake Stevens Police Department

ORI Number: WA0311900

Incident: 2016-00001981

Incident Date/Time: 1/31/2016 12:41:42 PM

Location: SR 9 NE / MARKET PL

#Error

Phone Number: (425) 244-1381

Report Required: No **Prior Hazards:** No

LE Case Number:

Incident Type: #Error

Venue: Lake Stevens

Source: #Error Priority: Status: #Error

Nature of Call:

Unit/Personnel

Unit Personnel

19D2 SS0072-Aukerman 19D3 SS0136-Shein

Person(s)

No. Role Name Address Phone Race Sex DOB

1 #Error #Error #Error #Error

#Error #Error 2 #Error #Error #Error

#Error

Vehicle(s)

Year Make Model Color License Role State Type

Disposition(s)

Disposition Count #Error 1

Property

Date Code Type Make Model Description Tag No. Item No.

CAD Narrative

01/31/2016: 12:52:14 SP0189 Narrative: 2 CARS REARENDER, BOTH OFF RD, INV

01/31/2016: 12:47:40 SP0213 Narrative: pd req aid also respond, 9 year with ch px from col

01/31/2016: 12:46:45 SP0374 Narrative: Narrative added from associated Call #: 401 - NON INJ, NON BLKING, EXPLORER VS

SIL NISSAN XTERRA

01/31/2016: 12:46:18 SP0374 Narrative: Narrative added from associated Call #: 401 - DRIVER TALKING ON PH, RP NOW

SAYING ACC

01/31/2016: 12:45:31 SP0374 Narrative: Narrative added from associated Call #: 401 - AC, JO, VEH PASSED RP AND BRAKE

CHECKED RP, RED FORD EXPLORER L/ANC3613

01/31/2016: 12:45:23 SP0213 Narrative: AGENCY ADVISED

01/31/2016: 12:44:50 SP0403 Narrative: LR403

01/31/2016: 12:44:34 SP0403 Narrative: CC, NOW, NON INJ, NON BLOCKING, RP'S 9 YO SON SAYS HIS CHEST HURTS/WHIPLASH BUT AID DECLINED PER MOM, RED FORD EXPLORER VS GRAY NISSAN EXTERA L/ANC8099, SUBJS ARE PULLED TO THE SIDE OF SR 9, F IS MAKING FACES AT RP, RP IS GOING TO WAIT INSIDE HER VEHICLE



LAKE STEVENS POLICE DEPARTMENT

INCIDENT STATEMENT FORM

CASE NUMBER 16-01981

| VICTIM WITNESS | | | | | | | NC | N-DISCI | LOSURE | |
|---|-------------|---------|-------------------------------|-------------|------------|-----------|-----------|-----------|----------|---------|
| | | | - contract to the contract to | | | | | | 6 | |
| NAME (LAST, FIRST, MIDDLE | | RACE | Concors un | SEX | D.O.B. | AGE 33 | HGT 5'2" | WGT | HAIR | Blue |
| STREET ADDRESS | | | | CLTY | | 20 |) (| STATE | | IP |
| 12130 55h PI SE | S | H | · | 20 | acker | lin | | WA | | 1750 |
| 10 30 30 | CELL PHONE | - | , |) | woi | RK PHO | NE | 00,1 | 1.0 | 0 10 |
| 425 244 (381 | Sa | | | | | - | | | | |
| EMAIL ADDRESS (OPTIONAL) | ` | | | | | | MPLOY | MENT | [- | 10 |
| holden @ comca | St. W | et | | 00 V/ 100 C | | Stay | (a) + | tone | 100 | an |
| STATEMENT: | • | | | | \ | | | | | |
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| The was | 61 | IC/ | سناسع | 4 | 20 C | 10 | Se 1 | ly | 0 | |
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| 9 | (| | | | | | | | | |
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| | | | | | | | | | | |
| I CERTIFY (OR DECLARE) UNDER PENALTY OF P | PURJURY UND | ER THE | STATE OF WASH | HINGTO | N THAT THE | FOREGO | DING IS T | RUE AND | CORRECT | |
| SIGNATURE: | | | | | | | DAT | E SIGNE | (1/ | 0 |
| OFFICER/NUMBER: | | G | Shein | # | 136 | | DAT 2 | ESIGNE | // | |
| OUR MISSION STATEMENT: "WE BELIEVE T | | | | | | NG DEM | OCRACÝ | ARE VITAL | TO A SA | FE, |
| | HEALTHY, AI | ND PRO. | SPEROUS COMI | MUNITY | ,,,, | | Pa | ge C | of | |



LAKE STEVENS POLICE DEPARTMENT

INCIDENT STATEMENT FORM

CASE NUMBER 16-1981

| VICTIM WITNESS | | | | N | ON-DISCLOSURE |
|---|------------------------|---------------|-------------|--------------------------------|------------------------------|
| | | | | | |
| NAME (LAST, FIRST, MIDDLE Wales Kelley, Ann | RACE White | ETHNICITY | | .O.B. AGE HGT 30-72 43 51 | WGT HAIR EYES |
| STREET ADDRESS | 100 | | CITY | 50270 10 31 | STATE ZIP |
| 11064 44th St. SE | | | Sho | himish | WA 98290 |
| HOME PHONE 425-493-4267 | CELL PHONE 425-530- | 9341 | | WORK PHONE | |
| EMAIL ADDRESS (OPTIONAL) k9 ke1(a | ymail. com | - | | PLACE OF EMPLO 2nd Chance W | YMENT ildlife (are Center |
| STATEMENT: | | | | | |
| I was traveling north | on hwy 9 | Red | exploi | rer cut me | off after |
| coming up very fast | on my k | ight w | here | it goes d | own from |
| 2 lanes to one la | ne. I ho | Ared a | and. | that was | H.I |
| didn't tail gate but | - She ker | ot hit | ing he | er brakes | I quess |
| because she was | mad tha | + I | hon | ked when | She cut |
| me off. After doi | ng that | 5 or 6 | tim | es and n | ist getting a |
| reaction out of m | e, She pus | st fla | ct ou | it stoppe | d. UI |
| was about 3 car | lengths | behind | her | , but a | + 40 mph |
| it wasn't enough | · Space | to st | 6p C | omple toly | on the |
| wet badand or | ny vehic | le hi | t he | rs. No | one had |
| Stopped in thent | ot her, | traff | ic 1 | was mov | ing at a |
| hormal vate. She | just st | opped | out | of road | d rage. |
| She was driving | o a gares | Sively | 13 | Start ie | ofth Owhen |
| She came up to | ist Juspe | edina | alo | ng the | right Side |
| of me, here was | s notra- | Hich | ehir | Ame Thy | en and She |
| Could have easily | Slipped | in | sehiv | nd me. | she |
| intentionally caus | ed Thisi | | | | |
| | | | | | |
| I CERTIFY (OR DECLARE) UNDER PENALTY OF | PURIURY UNDER THE S | TATE OF WASH | IINGTON TH | AT THE EOREGOING IS | TRUE AND CORRECT |
| SIGNATURE: Van 0 111 | 0. | | | | TE SIGNED: |
| OFFICED (NI INADED) | | | | | 1-31-16 |
| OFFICER/NUMBER: | j. Shein | | | DA | TE SIGNED: |
| OUR MISSION STATEMENT: "WE BELIEVE | THAT PRESERVING LIFE | , ENSURINGJUS | STICE AND G | GUARDING DEMOCRACY | ARE VITAL TO A SAFE, |
| | HEALTHY, AND PROS | PEKUUS CUIMN | /IUNIIY" | Pa | age 1 OF 1 |

Collision Supplemental

| | STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT 1501071 | 7 27 |
|--------|--|-------------------|
| | INTERSTATE CITY STREET V FIRE RESULTED 2 | |
| 1 1 | STATE ROUTE OTHER OTHER LOCAL AGENCY CODING | |
| 2 1 | COUNTY RD PRIVATE WAY INVOLVED TOTAL # OF UNITS 02 OBJECT UNITS 15 | 0 28 |
| 31 | RESERVATION | |
| | DATE OF COLLISION 01 - 31 - 2016 1241 31 S W OF W OF W 0664 3 | |
| 4 | ON (PRIMARY TRAFFIC WAY) INTERSECTION V NON-INTERSECTION BLOCK NO. V 400 0 | 1 29 |
| 4a | DISTANCE OF (REFERENCE OR CROSS STREET) | . 29 |
| 5 | MILES N E 4TH ST SE | |
| | UNIT 01 MOTOR VEHICLE PEDAL-CYCLE PEDAL-CYCLE PHONE D: 4255309341 | 1 30 |
| 6 1 | LAST NAME WALES FIRST NAME KELLEY MIDDLE INITIAL A | |
| | STREET 11004 44TH ST SE | |
| 7 | SNOHOMISH ST WA ZIP 982905701 1 1 | 2 31 |
| 8 | CDL RESTRICTIONS ENDORSEMENTS 2 | $\overline{\Box}$ |
| 99 | DRIVER'S LICENSE # WALESKA286PT STATE WA SEX F D.O.B. MMDDYYYY 10 _ 30 _ 1972 | |
| 10 9 | ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET 2 INJURY 1 NATURE OF INJURIES | 2 32 |
| 11 0 0 | LICENSE ANC8099 STATE WA VIN# 5N1AN08W65C643856 | |
| 12 0 0 | TRAILER PLATE # STATE TRAILER PLATE # STATE | |
| 13 4 | VEH. YEAR 2005 MAKE NISS MODEL XTERRA STYLE UT VEHICLE TOWED YES NOV TOWED BY REGISTERED OWNER INFO. VEHICLE NO. 1 | |
| 14 4 | LIABLITY INSURANCE INSURANCE CO A POLICY # INSURANCE CO A POLICY # INSURANCE CO A POLICY # TROM TROM | |
| 15 2 | VEHICLE YES NO CITATION # CHARGE CHARGE CHA | 3 ~ |
| 16 2 | UNIT 02 MOTOR VEHICLE V PEDAL- PEDESTRIAN PEDESTRIAN DAYMAGE THRESHOLD MET VES NO VEHICLE D: 4252441381 | 35 |
| | LAST NAME VAN-VOORST FIRST NAME HEATHER MIDDLE INITIAL 4 | 36 |
| 17 | STREET NEW ADDRESS 12130 58TH AVE SE | 37 |
| 18 | CITY SNOHOMISH ST WA ZIP 98290 | 38 |
| 19 | CDL RESTRICTIONS ENDORSEMENTS | 39 |
| 20 | DRIVER'S LICENSE # SEX F D.O.B. MMDDYYYY 11 - 11 - 1982 | |
| 21 | ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET 2 INJURY 1 NATURE OF INJURIES | |
| 22 | LICENSE PLATE # 086VNG STATE WA VIN# 1FMZU74KX4ZA96359 | |
| 23 | TRAILER PLATE # STATE TRAILER PLATE # STATE | 41 |
| 24 | VEH. YEAR 2004 MAKE FORD MODEL EXPLR STYLE UT VEHICLE TOWED TOWED BY GOVET-VEHICLE YES NOW | 42 |
| | REGISTERED OWNER INFO. UABILITY INSURANCE V INSURANCE CO HALLMARK INS 1234 A POLICY # A POLICY # A POLICY # | _ |
| 25 | UABILITY INSURANCE INSURANCE CO HALLMARK INS 1234 9 TOP 9 TOP 10 BOTTOM # CHARGE 10 BOTTOM # STANDING 10 TOP 10 BOTTOM # STANDING 10 BOTTOM | |
| 26 | OFFICER'S NAME (PRINT) BADGE OR ID # AGENCY WA0311900 | |
| | PART A 3000-345-159 R (7/06) | |





CORRECTION

REPORT NO.

E512875

| CASE # | 16 |
|--------|----|

ASE # 16-1981

| | | | ADDIT | IONAL PERSC | NS INVOLV | ED (PASSE | NGERS | AND/OR | WITNE | ESSE: | S ONLY) | | | |
|---|----------------------|-------------------|--------------------|---|----------------------|-----------------|----------------|------------------|-----------|-----------|--------------------|---------|----------------|-----------|
| NAME (LAST, FIRST, MIDDLE I | NITIAL) | | | | | ` | | | | | , | | | |
| ADDRESS & PHONE # | | | | | | | | | SEX | | D.O.B. MMDDYYYY | | - | |
| PASSENGER . V | VITNESS | JNIT # | | SEAT POS. | AIRBAG | RESTR. | E | ECT | HEL US | MET SE | INJURY CLASS | (| NATURE OF IN. | URIES |
| NAME (LAST, FIRST, MIDDLE I | NITIAL) | | | | | | | | | | | | | |
| ADDRESS & PHONE # | | · | | | | | | | SEX | | D.O.B. MMDDYYYY | - | | |
| PASSENGER V | VITNESS | JNIT # | | SEAT POS. | AIRBAG | RESTR. | E | ECT | HEL | | INJUR' | | NATURE OF IN. | URIES |
| NAME (LAST, FIRST, MIDDLE I | NITIAL) | | | | | | | | | | | | | |
| ADDRESS & PHONE # | , | | | | | | | | SEX | | D.O.B. | | | |
| PASSENGER V | VITNESS | JNIT # | | SEAT POS. | AIRBAG | RESTR. | E | ECT | HEL | | INJUR' CLASS | | NATURE OF IN. | URIES |
| | | | | -03. | N | ARRATI | IVF | | 1 00 | 3L | ODAGO | | | |
| Departme wearing f | ent was full duty | on rou unifori | utine pa m with | ly 1533 ho atrol in a f shoulder ision in th | fully mar patches | ked pa and a | trol v bado | ehicle je. | e eq | uip | ped wit | h ligh | nts and s | irens |
| I arrived to the scene of a collision in the 400 block of SR9. I contacted both drivers. Vehicle 1, Nissan XTerra ANC8099 driven by Kelley A. Wales (DOB: 10/30/1972) struck Vehicle 2, Ford Explorer 086VGN driven by Heather Van Voorst (DOB: 11/11/1982). I took witness statements from both drivers. Both drivers admit that Kelley was following very closely and Heather slammed on her brakes intentionally to try to "send a message" to Kelley to back off. | | | | | | | | | | | | | | |
| WASHIN | GTON 1 | THAT | THE F | Y OF PEF OREGOII D USER I | NG STA | TEMEN | NTS A | ARE ⁻ | TRU | JE A | AND C | ORRI | ECT, AN | DIAM |
| Gleb She Officer | ein #136 | | | | 2/5/20 Date |)16 | | | | | vens, W Signed | /A | | |
| CERTIFY (DECLAI | RE) UNDER PE | NALTY OF | PERJURY (| JNDER THE LAW: | 'S OF THE STA | TE OF WASH | HINGTON | THAT TH | E FORI | EGOIN | NG IS TRUE A | AND COF | RRECT. (RCW 9 | A.72.085) |
| G. SHEIN | | | | | | | -16 10:1 | | • | | .5.5627 | | | |
| NVESTIGATING OFF | TICER'S SIGNAT | URE | | UNIT OR DIST. | DET | DATED | | DATE | | PLAC | E SIGNED | | | |
| SGT. C. VALVICK | 0071 | | | | | | | DAIL | | /2016 | 5:17:33 PM | 1 | | |
| BADGE OR ID # | 0136 | | ORI# | WA0311900 | | | TIME PO | DLICE DISPA | TCHED | 12:4 | 1 PM | TIME F | POLICE ARRIVED | 12:45 PM |

REPORT NO. E512875 **CASE #** 16-1981 DATE AND TIME OF COLLISION 01/31/16 12:41

